

**Hawaii Employer-Union Health Benefits Trust Fund**  
**EUTF Monthly Retiree COBRA Rates**

Benefit Plan	Type of Enrollment	Regular COBRA
		1/1/2015 - 12/31/2015
MEDICAL PLANS - MEDICARE		
HMSA PPO Medicare	Self	\$ 197.33
	Two Party	384.56
	Family	570.08
Medicare Prescription Drug	Self	\$ 179.19
	Two-Party	348.94
	Family	517.36
Kaiser HMO Medicare Kaiser Prescription Drug	Self	\$ 406.08
	Two-Party	792.25
	Family	1,174.35
MEDICAL PLANS - NON-MEDICARE		
HMSA PPO Non-Medicare	Self	\$ 432.72
	Two-Party	843.25
	Family	1,250.05
Non-Medicare Prescription Drug	Self	\$ 154.96
	Two-Party	301.82
	Family	447.49
Kaiser HMO Non Medicare Kaiser Prescription Drug	Self	\$ 661.25
	Two-Party	1,340.93
	Family	1,980.72
DENTAL PLAN		
HDS Dental	Self	\$ 30.84
	Two-Party	60.16
	Family	73.68
VISION PLAN		
VSP Vision	Self	\$ 5.43
	Two-Party	10.85
	Family	14.57